| PATENT APPLICATION FEE DETERMINATION RECORD Effective November 10, 1998 O9/369 190 | | | | | | | | | | | | | |
|---|--|----------------------|-------------------------------|-------------------------------|----------------|--|--------------------------------------|---|----------------|------------------------|---------|---------------------|------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2). | | | | | | | | SMA | | ENTITY | OR | OTHER | THAN ENTITY |
| FOR | | | NUMBE | R FILED | | NUMBER | EXTRA | RAT | Έ | FEE | 1 | RATE | FEE |
| BASIC FEE | | | | \ | | | | | | 380.00 | OR | | 760.00 |
| TOTAL CLAIMS | | | 31 | minus | 20= | • / | 7 | X\$ f |)= | | OR | X\$18= | 306 |
| INDEPENDENT CLAIMS | | | <u> </u> | minus | 3 = | • ~ | | X39 |) = | | OR | X78= | 156 |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | +131 |) - | | OR | +260= | | | |
| * If the difference in column 1 is less than zero, enter *0* in column 2 | | | | | | | TOTA | AL. | | OR' | TOTAL | 1222 | |
| | CLAIMS AS AMENDED - PART II | | | | | | | 6114 | | | | OTHER | |
| Ľ | 31/20 | | imin 1) Nikis | , | | Column 2) RIGHEST | (Column 3) | SMA | ш | ENTITY | OR I | SMALL | |
| AMENDMENT A | | REM AF | ANING TER DMENT | | PF | MUMBER REVIOUSLY PAID FOR | PRESENT EXTRA | RAT | E | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | . 3 | 7 | Minus | - | 31 | . 0 | - X\$ 9 | = | \bigwedge | OR | X\$18= | |
| | Independent | * | J NOEM | Minus | DENIC | 5 SENT CLAIM | - | X39 | - | ĽX | OR | X78= | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | | ĬĬ. | | ØЯ | +260= . | |
| | in layos | | | | | | | TO ADDIT, F | IAL FE | | OR | TOTAL ADDIT, FEE | |
| | 12/2903 | | imn 1) | | | Column 2) | (Column 3) | , | | | | | • |
| AMENOMENT B | | REM | ums Vining Ter Dwent | | PF | HIGHEST NUMBER NEVIOUSLY PAID FOR | PRESENT EXTRA | RATI | E | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | • 3 | 7 | Minus | ** | 37 | - € | X\$ 9 | • | | OR | X\$18= | |
| | Independent | • 5 | 1054 | Minus | | 5 | · · · | X39- | | | OR | X78= | |
| - | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | | | OR | +260= | |
| | | • | | | | | | ADDIT, F | . – | | OR | YOYAL ADDIT, FEE | |
| | • | (Colu | mn 1) | | (C | olumn 2) | (Column 3) | AUUII. F | CE I | | • | WUII. FEE | |
| AMENDMENT C | | CU REMA AF | UMS UNING TER OMENT | | PR | HIGHEST NUMBER EVIOUSLY VAID FOR | PRESENT EXTRA | RATE | | ADDI- TIONAL FEE | ſ | RATE | ADDI- TIONAL FEE |
| | Total | • | | Minus | ** | | - | X\$ 9: | . 1 | | оя | X\$18= | |
| | Independent | | | Minus | *** | | e | X39= | 1 | | | X78= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | + | | OR | V1.0= | |
| * If the entry in column 1 is less than the entry in column 2, write "o" in column 3. | | | | | | | | | | | | | |
| ** | i the "Highest Nur I the "Highest Num The "Highest Num | nber Pro nber Pre | fousty Pal fousty Pa | d For IN THE Id For IN THE | S SPA S SPA | CE is less that CE is less that | n 20, enter "20." n 3. enter "3." | ADDIT. FI | ΕL | | | DOIT. FEEL mm 1. | |

Application/or Docket Number